

Rec'd PET/PTO

10 DEC 2004

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/517371

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1				
2		2				
3		3				
4		4				
5		5				
6		6				
7		7				
8		8				
9		9				
10		10				
11		11				
12		12				
13		13				
14		14				
15		15				
16		16				
17		17				
18		18				
19		19				
20		20				
21		21				
22		22				
23		23				
24		24				
25		25				
26		26				
27		27				
28		28				
29		29				
30		30				
31		31				
32		32				
33		33				
34		34				
35		35				
36		36				
37		37				
38		38				
39		39				
40		40				
41		41				
42		42				
43		43				
44		44				
45		45				
46		46				
47		47				
48		48				
49		49				
50		50				
TOTAL IND.	1					
TOTAL DEP.	16					
TOTAL CLAIMS	17					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						